

MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

DEPARTMENT OF PUBLIC HEALTH AND WELFARE

63-035896

STATE FILE NUMBER

Registration District No. 139 Primary Registration District No. 3023 Registrar's No. 251

DO NOT WRITE ON THIS STUB

AMENDED

VS 300
Rev. 4/59

1042.5

20420

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9450.1

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DATE AMENDED

AMENDMENTS ON THIS RECORD ARE AS FOLLOWS

INSTEAD OF

SHOULD READ

ITEM NO.

DOCUMENT

MEDICAL CERTIFICATION

BY AFFIDAVIT OF

FILED OCT 7 1963

1. PLACE OF DEATH
a. COUNTY Henry
b. CITY (if outside corporate limits, give TOWNSHIP only) OR TOWN CLINTON Length of stay in 1b 8 Wks.
c. FULL NAME OF (if NOT in hospital, give location) HOSPITAL OR INSTITUTION CLINTON CANK HOME Inside Limits Yes No

2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission).
a. STATE Mo b. COUNTY Henry
c. CITY OR TOWN Calhoun Inside Limits Yes No
d. STREET ADDRESS (If outside, give location) Reside on Farm Yes No

3. NAME OF DECEASED (Type or print) - First Middle Last James Wilburn Greeson
4. DATE OF DEATH Month 10 Day 3 Year 1963

5. SEX MALE 6. COLOR OR RACE WHITE 7. Married Never Married Widowed Divorced
8. DATE OF BIRTH 4-23-1873 9. AGE (last birthday) 90 IF UNDER 1 YEAR Months Days Hours Min.
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) FARMING 10b. KIND OF BUSINESS OR INDUSTRY FARMING 11. BIRTHPLACE (City and state or country) Henry Co Mo 12. CITIZEN OF WHAT COUNTRY U.S.A.

13a. FATHER'S NAME John A Greeson 13b. MOTHER'S MAIDEN NAME Mary M Henry 14. NAME OF HUSBAND OR WIFE Mrs Frank Goodrich Clinton

15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) No 16. SOCIAL SECURITY NO. 17. INFORMANT Mrs Frank Goodrich Clinton Address

18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c).)
PART I. DEATH WAS CAUSED BY:
IMMEDIATE CAUSE (a) Langrene of left foot INTERVAL BETWEEN ONSET AND DEATH 6 wks
Conditions, if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) Generalized arterio-sclerosis One year
DUE TO (c) None
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a) None
PART III. If deceased was female was there a pregnancy in last 90 days. Yes No Unknown

19. WAS AUTOPSY PERFORMED? YES NO 20a. ACCIDENT SUICIDE HOMICIDE 20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)
20c. TIME OF INJURY Hour Month, Day, Year a.m. p.m.
20d. INJURY OCCURRED WHILE AT WORK NOT WHILE AT WORK 20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.) 20f. CITY, TOWN, OR LOCATION COUNTY STATE
21. I attended the deceased from 12/3/46 to 10/3/63 and last saw him alive on 9/30/63
Death occurred at 10/3/63 12:05 P.m on the date stated above, and to the best of my knowledge, from the causes stated.

22a. SIGNATURE (Degree or title) S. B. Hughes, M.D. 22b. ADDRESS Clinton, Mo. 22c. DATE SIGNED 10/5/63
23a. BURIAL, CREMATION, REMOVAL (Specify) Burial 23b. DATE 10-6-63 23c. NAME OF CEMETERY OR CREMATORY CALHOUN CEM. 23d. LOCATION (City, town, or county) (State) CALHOUN MO
24. FUNERAL DIRECTOR SICKMAN + DUNNING CLINTON MO. ADDRESS 25. DATE RECD. BY LOCAL REG. OCT. 5, 1963 26. REGISTRAR'S SIGNATURE Mildred Bigum

(Licensed Embalmer's Statement on Reverse Side)

USE BLACK INK OR TYPEWRITER RIBBON

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,

or by _____, Student Embalmer No. _____

working under my personal supervision.

Student _____

Signature of Student Embalmer

Signed R. L. Dunning

Licensed Embalmer No. 4710

P. O. Address Clinton MD

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.

Permit Obtained 10-5-63 MB